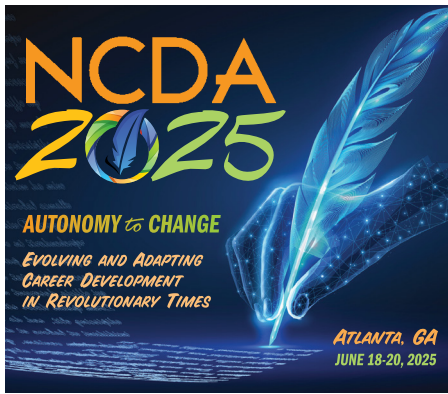


# REGISTRATION FORM



**NCD A GLOBAL CAREER DEVELOPMENT CONFERENCE**  
**JUNE 18-20, 2025**  
**PRE-CONFERENCE: JUNE 17, 2025**

Please check here if you are a first-time attendee.

Name \_\_\_\_\_

Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip/Country \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_  
(please print email address clearly)

Please identify which one constituency group best describes you:

- Counselor Educators & Researchers
- Private Practice, Business/Industry & Agencies
- Higher Education Career Counselors & Specialists
- School Career Counselors & Specialists
- Graduate Student

## SECURE ONLINE REGISTRATION AVAILABLE AT: [www.ncdaconference.org](http://www.ncdaconference.org)

**IMPORTANT: NCD A Headquarters will not accept conference registrations in the office after June 2. Please plan to register on-site if you wish to register after June 2, 2025.**

### CONFERENCE REGISTRATION, June 18-20, 2025

NCD A Member	\$599	\$ _____
NCD A Student/Retired/New Professional	\$475	\$ _____
Non-Member	\$699	\$ _____
<b>VIRTUAL "add on" for those attending the live event in Atlanta</b> <small>*includes select live events in Atlanta and access to the virtual platform. Must register for full conference registration to take advantage of this discounted rate.</small>	\$200	\$ _____

### VIRTUAL ONLY ATTENDANCE (virtual event opens July 14)

NCD A Member	\$350	\$ _____
NCD A Student/Retired/New Professional	\$200	\$ _____
Non-Member	\$450	\$ _____

### PROFESSIONAL DEVELOPMENT INSTITUTES

*On-site registration cannot be guaranteed. Space is limited. PDIs are OPTIONAL and not included in Conference Registration fees. Please see [www.ncdaconference.org](http://www.ncdaconference.org) for titles and descriptions of PDIs.*

	NON-MEMBER	MEMBER/STUDENT/NP	
AM PDI (one PDI ONLY)	\$150	\$100	\$ _____
PM PDI (one PDI ONLY)	\$150	\$100	\$ _____
AM and PM PDI (\$50 discount for two PDIs)	\$200	\$150	\$ _____

**AM PDIs:** June 17, 7:45 am – 12:00 noon (please indicate your selection)

- PDI #1    PDI #2    PDI #3    PDI #4    PDI #5

**PM PDIs:** June 17, 1:15 pm – 5:30 pm (please indicate your selection)

- PDI #6    PDI #7    PDI #8    PDI #9

### ONE-DAY REGISTRATION


Please indicate:  Wednesday    Thursday    Friday


NCD A Member	\$200	\$ _____
NCD A Student/Retired/New Professional	\$200	\$ _____
Non-Member	\$300	\$ _____


# REGISTRATION FORM



## HOW TO REGISTER

 **Securely Online at**  
[www.ncdaconference.org](http://www.ncdaconference.org)  
(preferred method)  
Major credit cards accepted.

 **Mail**  
Check or Credit Card accepted.  
Send Registration Form and payment to:  
NCDCA, 305 North Beech Circle,  
Broken Arrow, OK 74012

 **Fax**  
Purchase Order or Credit Card accepted.  
Fax: (918) 663-7058

Confirmations will be sent via email.

## CANCELLATION POLICY

Cancellations received in writing prior to June 2 will be subject to a \$50 processing fee (US funds). NO refunds will be given after June 2. If paying via purchase order, your organization will be required to fulfill the purchase order even if you do not attend. Refunds will not be given for no-shows after the conference.

## SUBSTITUTIONS

Attendee substitutions will be accepted if received in writing from the original registrant by June 2. Requests may be emailed to Natalie Scrimsher at [nscrimsher@ncda.org](mailto:nscrimsher@ncda.org). Registration fees will be based on substitute's membership status.

## ATTENDEE IMAGE POLICY

See [www.NCDAconference.org](http://www.NCDAconference.org) for full policy.

### QUESTIONS?

Visit our website at  
[www.NCDAconference.org](http://www.NCDAconference.org)  
Phone: (918) 663-7060 Fax: (918) 663-7058  
Email: Natalie Scrimsher:  
[nscrimsher@ncda.org](mailto:nscrimsher@ncda.org)  
NCDCA  
305 North Beech Circle  
Broken Arrow, OK 74012

## SPECIAL NEEDS

Please indicate any special needs you may have.  Dietary  Physical

Please provide a brief description of special needs: \_\_\_\_\_

\_\_\_\_\_

## AMBASSADOR PROGRAM

- I am interested in being an NCDCA International Ambassador at the conference.
- I am an international participant and interested in having an NCDCA Ambassador at the conference.

## NCDCA MEMBERSHIP

**Yes, I would like to join/renew NCDCA membership and save on my conference registration fees.**

**Regular Member** (annual fee) \$95 \$ \_\_\_\_\_  
For those who have an interest or involvement in career development.

**Student Member** (annual fee) \$40 \$ \_\_\_\_\_  
Students enrolled in programs preparing them for counseling and other career development areas.

**New Professional Member** (annual fee) \$40 \$ \_\_\_\_\_  
For graduate students, those in their first year of employment OR anyone new to NCDCA regardless of employment history. Limit of one year.

## PRIVACY STATEMENT

- I have read and understand the NCDCA Privacy Statement. The NCDCA Privacy Policy can be found at [www.ncda.org](http://www.ncda.org).

## PAYMENT

- Payment must accompany registration form or registration will not be processed.
- Purchase Order Payments: PO must accompany registration form.
- Payment must be made in U.S. dollars.
- Payable to: National Career Development Association (FEI: 52-6045839)
- W-9 can be found at [www.ncdaconference.org](http://www.ncdaconference.org)

Check  Credit Card  Purchase Order # \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Billing Address of Cardholder \_\_\_\_\_

City, State, Zip, Country \_\_\_\_\_

Email of Cardholder \_\_\_\_\_

## TOTAL ENCLOSED

Total payment for both sides of registration form.  
Conference Registration and NCDCA Membership. \$ \_\_\_\_\_